

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	S1	689663	9-15-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
1	✓
2	✓
3	
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10	✓
11	0
12	0
13	✓
14	✓
15	✓
16	✓
17	0
18	✓
19	0
20	0
21	✓
22	0
23	✓
24	✓
25	0
26	0
27	✓
28	✓
29	0
30	0
31	✓
32	✓
33	✓
34	✓
35	0
36	✓
37	0
38	0
39	✓
40	0
41	✓
42	✓
43	0
44	0
45	✓
46	0
47	0
48	✓
49	✓
50	✓

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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